

Article - Health - General

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§19–1416.

(a) In this section, “family council” means a group of individuals who work together to protect the rights of and improve the quality of life of residents of a nursing home.

(b) (1) A family council for a nursing home may consist of the following members:

(i) Members of a resident’s family; or

(ii) An individual appointed by the resident, or if the resident is incapable of appointing an individual, an individual appointed by the resident’s family.

(2) (i) Subject to subparagraph (ii) of this paragraph, a family council may be created by the owner, operator, or staff of a nursing home.

(ii) Except as provided in paragraph (3) of this subsection, in order to facilitate the development of a family council, the owner, operator, or staff of a nursing home may lead the family council for no longer than 6 months at which time the family council shall be led by a member of the family council.

(3) On the written request of a family council, the nursing home may assist the family council in the administrative functions of operating the family council in a mutually agreed upon manner.

(c) A nursing home shall give each new or prospective resident the following written information about the family council:

(1) The name, address, and phone number of a current member of the family council;

(2) A brief description of the purpose and function of the family council;

(3) Instructions on how the resident or prospective resident may review the public files described in subsection (e) of this section; and

(4) The name, address, and phone number of the State or local ombudsman.

(d) A nursing home shall respond in writing to any written grievance or other written communication from the family council within 14 calendar days after receiving a communication.

(e) (1) A nursing home shall create and maintain a public correspondence file and a regulatory correspondence file for communications with a family council.

(2) The correspondence files shall include a copy of each written communication and response described in subsection (d) of this section.

(3) (i) The records in the regulatory file shall be unedited.

(ii) The records in the public file shall delete any information that identifies an individual resident.

(4) The public file may be reviewed by a resident, prospective resident, or the representative of either a resident or prospective resident during normal business hours and at any other time the nursing home agrees to make the public file available.

(5) The nursing home shall promptly comply with a request by a licensing authority to review the records in either the public or regulatory files.

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